

PRINTED: 05/13/2015
FORM APPROVED

50533

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL035017	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 05/06/2015
NAME OF PROVIDER OR SUPPLIER THE JORDAN		STREET ADDRESS, CITY, STATE, ZIP CODE 90 COTTRELL ROAD LOUISBURG, NC 27549		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments Report by Suzanna Fay DHSR Construction Section conducted a Biennial Survey on May 6, 2015 from 9:43 AM to 11:27 AM at the above referenced facility. DHSR records indicate the home was first licensed on August 31, 2006 as a Family Care Home for six ambulatory Residents (able to evacuate and respond without any physical or verbal assistance during a fire or other emergency). Based on this information we are requiring the home to maintain compliance with the following: the 2005 Rules 10A NCAC 13G for Family Care Homes and the 2002 North Carolina State Building Code - Section 421.2 - Residential Care Homes. At the time of our visit, we cited deficiencies that require an acceptable plan of correction. They are as follows:	C 000		
C 105	Initial Licensure-Meet NCSBC SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (a) Any building licensed for the first time as a family care home shall meet the applicable requirements of the North Carolina State Building Code. All new construction, additions and renovations to existing buildings shall meet the requirements of the North Carolina State Building Code for One and Two Family Dwellings and Residential Care Facilities if applicable. All applicable volumes of The North Carolina State Building Code, which is incorporated by reference, including all subsequent amendments, may be purchased from the Department of Insurance Engineering Division located at 322 Chapanoke Road, Suite 200, Raleigh, North	C 105		

CONSTRUCTION SECTION
JUN 12 2015
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Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

KCQB21

6-10-15
Continuation sheet 1 of 7

SCANNED

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C 105	<p>Continued From page 1</p> <p>Carolina 27603 at a cost of three hundred eighty dollars (\$380.00).</p> <p>(b) Each home shall be planned, constructed, equipped and maintained to provide the services offered in the home.</p> <p>This Rule is not met as evidenced by:</p> <p>1. At the time of this survey, the facility was utilizing an interior room as Client bedroom 4. There are no windows in the room and only one interior door. Section R303.1 of the 2002 NC Residential Code requires that "all habitable rooms shall be provided with aggregate glazing area of not less than 8 percent of the floor area of such rooms." It also requires that "the minimum openable area to the outdoors shall be 4 percent of the floor area being ventilated. Section R310 requires that "every sleeping room shall have at least one openable emergency escape and rescue window or exterior door opening for emergency escape and rescue." As this room does not meet any of these requirements it cannot be used as a sleeping room. The Owner has a couple of options:</p> <p>a.) The day room was originally approved as a bedroom as long as it had passage hardware to allow egress through to the exterior door. This room would need to be equipped with a smoke detector and a call system.</p> <p>b.) The staff bedroom could be converted to a client bedroom. The call system would need to be relocated. The Owner has a room on the front of the facility that is used as storage. It is on a lower level, but could be used as a staff room. It has a smoke detector that is working, but an additional smoke detector would be required outside the bedroom.</p>	C 105		

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C 105	Continued From page 2 Notify DHSR/Construction on how the Owner intends to rectify the use of an interior bedroom and update the evacuation plans.	C 105		
C 110	Construction-Basement, Attic SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (g) The basement and the attic shall not to be used for storage or sleeping. This Rule is not met as evidenced by: 1. Observations revealed some styrofoam panels stored in the central portion of the attic. Remove any stored items. Provide verification of the correction.	C 110		
C 111	Construction-Ceiling SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (h) The ceiling shall be at least seven and one-half feet from the floor. This Rule is not met as evidenced by: 1. Observations revealed that the ceiling height in the central portion of the facility has a ceiling height of 7'-1 1/2". This was cited during the last Biennial Survey and an equivalency has been approved. Due to the lower ceiling, no fixtures such as ceiling fans that would extend into the space will be permitted to maintain the maximum ceiling height available.	C 111		
C 153	Houskeeping And Furnishings-Clean, Repaired SECTION .0300 - THE BUILDING	C 153		

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C 153	<p>Continued From page 3</p> <p>10A NCAC 13G .0315 HOUSEKEEPING AND FURNISHINGS</p> <p>(a) Each family care home shall:</p> <p>(1) have walls, ceilings, and floors or floor coverings kept clean and in good repair;</p> <p>(2) have no chronic unpleasant odors;</p> <p>(3) have furniture clean and in good repair;</p> <p>(e) This Rule shall apply to new and existing homes.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Observations revealed that the wall paper strip between the kitchen sink backsplash and window was peeling away from the wall. Have a qualified person repair the wall. Provide documentation of the repairs.</p> <p>2. Observations revealed several scorch marks in the vinyl floor to the right of the kitchen stove. Interview with Staff revealed that a hot pan of food was dropped and shattered while removing it from the oven creating the burn marks in the floor. Have a qualified person repair or replace the vinyl floor in the kitchen. Provide documentation of the repairs.</p> <p>3. Observations revealed small black spots on the walls by the call button and along the ceiling edge of Bedroom 2 indicative of bedbug feces. Interview with Staff revealed that the facility had found bedbugs in the facility last year and they had treated for the infestation. Provide documentation that the facility was treated and confirmation that the facility no longer has bedbugs. Clean or paint the walls of Bedroom 2 to remove the spots.</p> <p>4. Observations revealed that the ceiling finish in the bathroom adjacent to Bedroom 1 was spalling. Have a qualified person repair the</p>	C 153			

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C 153	Continued From page 4 ceiling. Provide documentation of the repairs. 5. In Bedroom 1, it was observed that the ceiling was bubbled and flaking near the entrance to the room. Interview with Staff revealed that the facility had had a roof leak which had been repaired and was the source of the damaged ceiling. Have a qualified technician repair the ceiling in Bedroom 1. Provide documentation of the repairs.	C 153		
C 154	Housekeeping-Must Have Approved Sanitation SECTION .0300 - THE BUILDING 10A NCAC 13G .0315 HOUSEKEEPING AND FURNISHINGS (a) Each family care home shall: (4) have a North Carolina Division of Environmental Health approved sanitation classification at all times; (e) This Rule shall apply to new and existing homes. This Rule is not met as evidenced by: 1. At the time of this survey, the available Sanitation Inspection was dated March 31, 2014. Contact the office of Environmental Health to schedule a sanitation inspection. Provide a copy of the approved Sanitation Inspection report to DHSR/Construction Section.	C 154		
C 174	Building Equipment Maintained Safe, Operating SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in a family	C 174		

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C 174	<p>Continued From page 5</p> <p>care home shall be maintained in a safe and operating condition.</p> <p>(j) This Rule shall apply to new and existing family care homes.</p> <p>This Rule is not met as evidenced by:</p> <ol style="list-style-type: none"> At the time of this survey, the smoke detector in the hall between the Staff bedroom and Bedroom 1 was chirping indicating a low battery. Replace the battery or the smoke detector so that it works properly and is no longer chirping. Provide verification of the repairs. Observations revealed that the floor vent in the bathroom between the Staff bedroom and Bedroom 1 was rusty. Have a qualified person replace the floor vent. Provide documentation of the repairs. Observations revealed that the hand grip on the tub in the bathroom between the Staff bedroom and Bedroom 1 was loose. Have a qualified person tighten the handgrip or provide a secure hand grip for the tub. Provide documentation of the repairs. At the time of this survey, the call system in Bedroom 2 was not working. Have a qualified technician repair the call system. Provide documentation of the repairs. At the time of this survey, the exit light/sign at the kitchen exit did not work. Have a qualified technician repair or replace the exit sign. Provide documentation of the repairs. Observations revealed that the handrail on the exterior steps leading from the laundry room up to the garage was damaged and loose. Have a qualified person repair the rails at these steps. 	C 174		

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C 174	Continued From page 6 Provide documentation of the repairs. 7. Observations revealed that the man door to the garage was sticking and difficult to open. Have a qualified person repair the door so that it opens easily. Provide documentation of the repairs. 8. Observations revealed that the right bay of the garage had flooded. There were boxes and furniture stored in the garage that were sitting in water and the water was damaging the items stored. Verify the source of the leak and make any necessary repairs. Remove or relocate the stored items to prevent further damage. Provide documentation of the repairs.	C 174			

THE JORDAN ASSISTED LIVING
90 E.F. COTTRELL RD
LOUISBURG, NC 27549
919-496-9926

Referenced in the Citations

<u>Summary Statement of Deficiencies</u>	<u>ID Prefix Tag</u>
Initial Licensure – Meet NCBC (Interior bedroom)	C 105
Construction – Basement, Attic	C 110
Construction - Ceiling 7 ½	C 111
Housekeeping and Furnishings-Clean, Repaired	C 153
Housekeeping – Must Have Approved Sanitation	C 154
Building Equipment Maintained Safe, Operating	C 174

Jordan Assisted Living Home
 90 E.F. Cottrell Rd., Louisburg, NC 27547
 Plan of Correction
 Date of Biennial visit: May 6, 2015
 Provider #7805624
 FID #050533 FCL035017

C 105 INITIAL LICENSURE – MEET NCSBC

Owner will assure that home is planned, constructed, equipped and maintained to provide the services offered to meet the needs and safety of each client.

1. Management contacted DHR on 05/20/13 to present the option of a possibility of installing an additional doorway and would it be in compliance with the NC State Building Code. Surveyor will check with supervisor and Section Chief to verify with the local Building Official whether adding an additional door for an egress to the interior would pass NC State Building code. However, facility never received response back from DHR in 2013.
2. Administrator will contact realtor into possible modifying the day room or staff bedroom into client bedroom.
3. Administrator will contact realtor into installing a smoke detector and call system in day room if resident moves into this designated place. If resident moves into Staff Bedroom, Administrator along with realtor will look the relocation of the call system or purchasing another type of call system to install in the facility to ensure all residents have access and remain safe.

To be completed by 07/30/2015
 Person(s) Responsible: Administrator, Realtor, & Owner.

C 110 CONSTRUCTION – BASEMENT, ATTIC

1. Administrator will contact owner and realtor to have items (i.e. Styrofoam panels in the central portion, ladder and any other inappropriate item removed from the attic.
2. Administrator will submit documentation of repairs and completed work to DHR/Construction Section for review.

To be completed by 06/30/2015
 Person(s) Responsible: Administrator, Realtor, & Owner.

C 111 CONSTRUCTION CEILING

The ceiling shall be at least seven and one-half feet from the floor.

1. Owner will submit an equivalency request to allow the facility to operate and exist with a middle portion near the staff bedroom, bathroom, and client bedroom. The ceiling height of 7'-1 ½, which is considered out of the Licensure Rules for Family Care Homes.

To be completed by 06/30/2015

Jordan Assisted Living Home
90 E.F. Cottrell Rd., Louisburg, NC 27547
Plan of Correction
Date of Biennial visit: May 6, 2015
Provider #7805624
FID #050533 FCL035017

Person(s) Responsible: Owner & Administrator.

C 153 - HOUSEKEEPING AND FURNISHINGS-CLEAN, REPAIRED

1. Administrator will ensure the family care home has walls, ceilings, and floors or floor coverings kept clean and in good repair.
2. Administrator will contact realtor to have maintenance to come repair peeling wall paper strip between kitchen sink backsplash and window.
3. Administrator will contact realtor to have their maintenance department to replace scorched vinyl flooring.
4. Administrator will contact realtor to have their maintenance department clean and paint Bedroom 2 walls from bedbug feces.
5. Administrator will contact realtor to have their maintenance department repair ceiling in the bathroom and Bedroom 2 from previous roof leakage, which have been fixed.
6. Administrator will submit documentation of repairs and completed work to DHSR/Construction Section for review.

To be completed by: 07/30/2015

Responsible person(s): Administrator, Owner, Realtor, and Maintenance.

C 154 HOUSEKEEPING-MUST HAVE APPROVED SANITATION

1. Administrator will contact Franklin County Environmental Health Department-Division of Environmental Health to schedule a sanitation inspection.
2. Administrator will ensure health inspection is completed annually and in a timely manner.
3. Administrator will ensure a current copy of the Sanitation report is ready available and accessible in the facility at all time.
4. Administrator will submit a copy of updated inspections to DHSR/Construction Section for review when completed.
 - Facility will contact Department of Environmental Health in a timely manner to prevent future oversight and ensure safety for residents and staff.

Jordan Assisted Living Home
90 E.F. Cottrell Rd., Louisburg, NC 27547
Plan of Correction
Date of Biennial visit: May 6, 2015
Provider #7805624
FID #050533 FCL035017

To be completed by: 07/30/2015

Responsible person(s): Administrator, Quality Assurance, and Staff

C 174 – BUILDING EQUIPMENT MAINTAINED SAFE, OPERATING

1. Administrator will ensure all smoke detectors fully charged batteries. Staff will conducted monthly checks of all smoker detector throughout the facility to ensure all smoke detectors are working properly. If any detectors have malfunctioned, then management will contacted a licensed electrician to repair damage device in a timely manner.
2. Administrator will contact realtor to have maintenance replace rusty floor vent in the bathroom between Staff bedroom and Bedroom 1.
3. Administrator contact realtor to have maintenance fix the hand grip on tub in bathroom between Staff bedroom and Bedroom 1, and also ensure all other hand grips are installed properly for safety.
 - Staff will conduct a monthly observation to monitor and ensure all hand grips are on the commodes, tubs, and showers and working properly.
 - Staff will contact and report to administrator when grips need to replaced or serviced so maintenance can repair items in a timely manner for resident safety.
4. Administrator will contact a licensed electrician to repair or replace the call system in Bedroom 2 to ensure the system is working properly in resident bedroom. Also, Staff will conduct a monthly check in each bedroom to ensure each call systems are working properly.
5. Administrator will contact a licensed electrician to repair or replace the battery or lights in exit light sign located in kitchen exit. Also, staff will contact monthly checks to ensure they are operable and contact management when device need repairs.
6. Administrator will contact realtor to have maintenance repair loose handrail on the exterior steps leading from the laundry room up to the garage.
7. Administrator will contact realtor to have maintenance repair or replace main door to the garage so there is an easy access entering and exiting the garage.

Jordan Assisted Living Home
90 E.F. Cottrell Rd., Louisburg, NC 27547
Plan of Correction
Date of Biennial visit: May 6, 2015
Provider #7805624
FID #050533 FCL035017

8. Administrator will contact realtor and owner to have a qualified person assess and verify the source of the leak and make the necessary repairs to stop garage from flooding. Also, Administrator will contact owner about remove all stored item from out of the garage.
9. Administrator will submit documentation of repairs and completed work to DHSR/Construction Section for review.

To be completed by: 07/30/2015

Responsible person(s): Administrator, Realtor, & Owner.

The Jordan Assisting Living
90 E.F. Cottrell Road
Louisburg, NC 27549
(919) 496-9926

2015

June 10, 2015

Steven Lewis, Section Chief
North Carolina Department of Health and
Human Services
Division of Health Service Regulation
Construction Section
2705 Mail Service Center
Raleigh, NC 27699-2705

RE: The Jordan - FC Biennial Survey
FID #050533 Fcl03517


Dear Mr. Lewis:

Previously the Jordan Assisting Living Home underwent a Division of Health Services Regulation (DHSR) - Construction Section Biennial Survey on March 22, 2013. The inspector, Ms. Suzanna Fay, Architectural/Engineering Technician - DHSR Construction Section did the survey. Upon the completion of the FC Biennial Survey, Ms. Fay concluded the facility construction ceiling was less than seven and one-half feet per Section .0300-The Building 10A NCAC 13G .0302 Design & Construction. Therefore, based on this finding, this above rule appeared that the facility was out of compliance with State Design and construction code.

Prior to The Jordan's 2006 initial licensure, the county and state surveyed this area - the middle portion of the facility, which includes the staff bedroom, a bathroom, and a client bedroom having low ceiling, and concluded that the facility was in compliance to the 2005 Rules 10A NCAC 13G for Family Care Homes and the 2002 NC State Building Code - Section 421.2- Residential Care Homes.

Therefore, this letter is being submitted to request an equivalency request to allow this facility- The Jordan to exist with the low ceiling heights 7'-1 1/2" in regards to those previously mentioned violation which is stated in the letter.

Sincerely,



Carolyn Newell,
Administrator

The Jordan Family Care Home
90 E.F. Cottrell Road
Louisburg, NC 27549
(919) 496-9926

2015

June 10, 2015

Suzanna Fay,
Architectural/Engineering Technician
Division of Health Service Regulation
Construction Section
2705 Mail Service Center
Raleigh, NC 27699-2705

CONSTRUCTION SECTION

JUN 12 2015

RECEIVED

RE: The Jordan - FC Biennial Survey
FID #050533 Fcl03517

Dear Ms. Fay:

I am submitting to you the Plan of Correction (POC) for the Jordan Family Care FC Biennial Survey which occurred on May 6, 2015. Enclosed with this letter are the following documents by your request & for reviewing:

1. The signed document of the deficiencies by the Administrator
2. The POC of the facility
3. A letter of equivalency

If you have any additional questions or concerns regarding the POC or any of the above documents, please don't hesitate to contact the Jordan at 919-496-9926.

Sincerely,



Carolyn Newell,
Administrator